

OFFICIAL FILE  
ILLINOIS COMMERCE COMMISSION FORMAL COMPLAINT

Illinois Commerce Commission  
527 E. Capitol Avenue  
Springfield, Illinois 62701

For Commission Use Only:

Case: 08-0068

ORIGINAL

Regarding a complaint by (Person making the complaint): Ron J. Krush

Against (Utility name): AT&T

As to (Reason for complaint) overcharges, cut of exemptions and  
reconnection fees, run up of ind. charges  
u. \$4.00 from PR, to one of 2 \$5 given  
was told right bldg, wrong # total ran around  
exemptions cut ran up over 8000 / Burroughs she info  
in Orland Hills Illinois. operator cost is still at 1000's  
AVAILABLE AT Expense for DISABLED!

TO THE ILLINOIS COMMERCE COMMISSION, SPRINGFIELD, ILLINOIS:

My mailing address is 9320 Hunter Drive apt 303, Orland Hills IL

The service address that I am complaining about is 9320 Hunter Dr. apt 303, Orland Hills IL

My home telephone is (708) 226-6909

Between 8:30 A.M. and 5:00 P.M. weekdays, I can be reached at (708) 226-6909

My e-mail address is n/a I will accept documents by electronic means (e-mail) ☐ Yes ☒ No

(Full name of utility company) AT&T Illinois (respondent) is a public utility and is subject to the provisions of the Illinois Public Utilities Act.

In the space below, list the specific section of the law, Commission rule(s), or utility tariffs that you think is involved with your complaint.

Have you contacted the Consumer Services Division of the Illinois Commerce Commission about your complaint?

☐ Yes ☐ No

Has your complaint filed with that office been closed?

☐ Yes ☒ No

ILLINOIS  
COMMERCE COMMISSION  
2008 DEC -5 1 P:15  
CHIEF CLERK'S OFFICE

Please state your complaint briefly. Number each of the paragraphs. Please include time period and dollar amounts involved with your complaint. Use an extra sheet of paper if needed.

Disability Exemptions were cut without notice, ~~then~~ then Bill started getting run up --- was told forms for exemptions needed to be done every year PR, called & sent forms in, AT&T ~~for~~ SAID everything OK, phone service was cut once, ~~may~~ <sup>MANAGER</sup> HAD 3 wky call with Attorney General's Disability Advocate, MANAGER SAID He'd straighten things out, and put for 1 month, then added ~~un~~unvalued charges back on -- did not comply with Att. Gen. or their own REQUESTS they MADE of me, which were exemption forms signed by PR & FAXED IN

Please clearly state what you want the Commission to do in this case:

**NOTICE:** If personal information (such as a social security number or a bank account number) is contained in this complaint form or provided later in this proceeding, you should submit both a public copy **and** a confidential copy of the document. Any personal information contained in the public copy should be obscured or removed from the document prior to its submission to the Chief Clerk's office. Any personal information contained in the confidential copy should remain legible. If personal information is provided in your public copy, be advised that it will be available on the internet through the Commission's e-Docket website. The confidential copy of any filing you make, however, will only be available to Commission employees. If you file both a public and confidential version of a document, clearly mark them as such.

Today's Date: 12/4/08  
(Month, day, year)

Complainant's Signature: Ron Krush

If an attorney will represent you, please give the attorney's name, address, telephone number, and e-mail address.

When you finish filling out this complaint form, you need to file the original with the Commission's Chief Clerk. When filing the original complaint, be sure to include one copy of the original complaint for each utility company complained about (referred to as respondents).

#### VERIFICATION

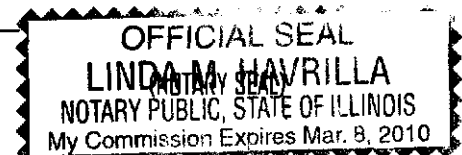
A notary public must witness the completion of this part of the form.

I, Ron Krush, Complainant, first being duly sworn, say that I have read the above petition and know what it says. The contents of this petition are true to the best of my knowledge.

Ron Krush  
Complainant's Signature

Subscribed and sworn/affirmed to before me on (month, day, year) 12-4-08

Linda M. Havrilla  
Signature, Notary Public, Illinois



**NOTE:** Failure to answer all of the questions on this form may result in this form being returned without processing.